

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: HOUSE OF LIVING WELL (0009856)

Address: 2910 VANG RD, SUN PRAIRIE, WI 53590

License Status: REGULAR

Licensed/Certified/Registered 10/24/2002

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0094762 **End Date:** 04/01/2005 **Type:** OTHER **Purpose:** DESK REVIEW

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008155 Served 04/02/2005

Deficiencies Cited
50.065(6)(b)

Subject Area
CREDENTIALIAED CAREGIVERS

Compliance
Verified

Corrected

Survey ID: 0094487 **End Date:** 03/30/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008199 Served 04/14/2005

Deficiencies Cited
50.065(2)(b)intro
50.065(4m)(c)

Subject Area
ENTITY BACKGROUND CHECK REQUIREMENTS
COMPLETE BACKGROUND INFORMATION
DISCLOSURE FORM
COMPLY WITH OSHA
ANNUAL WELL WATER INSPECTIONS
SMOKE DETECTORS-TESTING AND MAINTENANCE
MEDICATION- RECORD KEEPING
RESIDENT RECORD-RESIDENT RIGHTS

Compliance
Verified

Corrected

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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| Enforcement History |
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| Date: 04/01/2005 | SOD #10008155 | Appealed: No |
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Sanctions

COMPLY WITH REQUIREMENT

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